

**08 C 862**

**JUDGE KENNELLY  
MAGISTRATE JUDGE BROWN**

# **EXHIBIT A**

**Part 11 of 14**

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/13/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	CONTENTS	NEWCOURT TECHNOLOGIES CORP 2ND FL PO BOX 2017 BLOOMFIELD HILL, MI 48303-2017

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

**Loss Payable Provisions**Change(s) Effective: 05/13/2002

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

**Schedule**

<b>Premises Number</b>	<b>Description of Property</b>	<b>Loss Payee (Name and Address)</b>
0001	SOFTWARE	COMPAQ FINANCIAL SERVICES INSURANCE ADMINISTRATOR 420 MOUNTAIN AVE P.O. BOX 6 MURRAY HILL, NJ 07974-0006

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.
2. The following is added to SECTION IV. B. 5. Other Insurance:  
  
For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."
3. The following is added to SECTION V. Definitions:  
  
"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

**Loss Payable Provisions**Change(s) Effective: 05/13/2002

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

**Schedule****Premises**

<b>Number</b>	<b>Description of Property</b>	<b>Loss Payee (Name and Address)</b>
0001	LEASED COMPUTER HARDWARE/SOFTWARE LEASE #36&37 VALUE AT 75,000.00	CIT 4600 TOUCHTON RD EAST BUILDING 100, SUITE 300 JACKSONVILLE, FL 32246

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/13/2002

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This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0002	SOFTWARE	COMPAQ FINANCIAL SERVICES INSURANCE ADMINISTRATOR 420 MOUNTAIN AVENUE P.O. BOX 6 MURRAY HILL, NJ 07974-0006

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.
2. The following is added to SECTION IV. B. 5. Other Insurance:  
  
For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."
3. The following is added to SECTION V. Definitions:  
  
"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

**Loss Payable Provisions**Change(s) Effective: 05/13/2002

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

**Schedule**

<b>Premises Number</b>	<b>Description of Property</b>	<b>Loss Payee (Name and Address)</b>
0002	LEASED COMPUTER HARDWARE/SOFTWARE LEASE #36&37 VALUE AT 75,000.00	CIT 4600 TOUCHTON RD EAST BLDG 100, SUITE 300 JACKSONVILLE, FL 32246

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

**Loss Payable Provisions**Change(s) Effective: 05/13/2002

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

**Schedule**

<b>Premises Number</b>	<b>Description of Property</b>	<b>Loss Payee (Name and Address)</b>
0005	SOFTWARE	COMPAQ FINANCIAL SERVICES INSURANCE ADMINISTRATOR 420 MOUNTAIN AVENUE P.O. BOX 6 MURRAY HILL, NJ 07974-0006

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.
2. The following is added to SECTION IV. B. 5. Other Insurance:  
  
For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."
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Policy Number: BK01116165

**Loss Payable Provisions**Change(s) Effective: 05/13/2002

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

**Schedule****Premises****Number****Description of Property****Loss Payee (Name and Address)**

0005

LEASED COMPUTER HARDWARE/SOFTWARE LEASE  
#36&37 VALUE AT 75,000.00CIT  
4600 TOUCHTON RD EAST  
BLDG 100, SUITE 300  
JACKSONVILLE, FL 32246

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

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Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/13/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0007	LEASED COMPUTER EQUIPMENT	ARLINGTON CAPITAL BOX 7023 305 W BEAVER SUITE 400 TROY, MI 48007-7023

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

# The St. Paul Business Foundation Series

Change Endorsement



United States Fidelity and Guaranty Company  
5801 Smith Avenue  
Baltimore, Maryland 21209

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

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Change Number:	Change(s) Effective:	Policy Number:	Policy Expiration:
2	05/13/2002	BK01116165	05/01/2003

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**Named Insured**

VOA ASSOCIATES INCORPORATED  
VOA & OWP&P DESIGN COLLABORATIVE FOR NORTHWESTERN  
MEMORIAL HOSPITAL  
224 S MICHIGAN AVE STE #1400  
CHICAGO, IL 60604

**Your Agent**

AVA INSURANCE AGENCY  
125 N MARTINGALE RD STE 1100  
SCHAUMBURG, IL 60173

Agent Code: 120853

Client Number: 0001614656

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**Change(s)**

- \* The Umbrella Coverage Part is Amended
  - \* An Underlying Policy on the Umbrella Declarations is Amended
- | Form              | Description  |
|-------------------|--|
| CL/BF 00 45 03 95 | Change Endorsement                                       |
| CL/IL 191 02 93   | Commercial Umbrella Liability Coverage Part Declarations |
- 

**Additional Premium: WAIVED**

Date Issued: 05/04/2005

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Authorized Representative

INSURED  
CL/BF 00 45 03 95  
Print Date: 05/04/2005

Direct Bill Number  
4400031464  
Prepaid

# Commercial Umbrella Liability Coverage Part



## Declarations

United States Fidelity and Guaranty Company  
5801 Smith Avenue  
Baltimore, Maryland 21209

Change(s) Effective: 05/13/2002

Policy Number: BK01116165

Reason For Issuance: Endorsement Number: 2

### Limits Of Insurance:

\$ 5,000,000	General Aggregate Limit
\$ 5,000,000	Products-Completed Aggregate Limit
\$ 5,000,000	Each Incident Limit

### Form Of Business:

☐ Individual ☐ Partnership ☒ Corporation ☐ Other:

### Schedule of Underlying Insurance:

#### Automobile Liability

Policy Number/Policy Period	Insurer	Limits Of Insurance
BA01116172 05/01/2002 to 05/01/2003	United States Fidelity and Guaranty Company	\$1,000,000 Each Accident

#### Commercial General Liability

Policy Number/Policy Period	Insurer	Limits Of Insurance
BK01116165 05/01/2002 to 05/01/2003	United States Fidelity and Guaranty Company	\$1,000,000 Each Occurrence \$1,000,000 Personal and Advertising Injury \$2,000,000 General Aggregate \$2,000,000 Products - Compl. Ops. Aggregate

#### Employers Liability

Policy Number/Policy Period	Insurer	Limits Of Insurance
WVA2418844 05/01/2002 to 05/01/2003	St. Paul Mercury Insurance Company	Bodily Injury By Accident \$1,000,000 Each Accident Bodily Injury By Disease \$1,000,000 Policy Limit \$1,000,000 Each Employee

### Premium Schedule:

Premium Basis	Estimated Exposure	Rate Per \$999.99	Estimated Premium	Minimum Premium
N/A	N/A	N/A	N/A	N/A.

Total Advance Premium For This Coverage Part: \$2,450.00

Audit Period: ☒ None ☐ Annually ☐ Semiannually ☐ Quarterly ☐ Monthly

# Commercial Umbrella Liability Coverage Part

## Declarations

Change(s) Effective: 05/13/2002

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### **Forms And Endorsements Applicable To This Coverage Part:**

See attached Schedule of Forms and Endorsements, CL/BF 00 35.

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**The St. Paul Business Foundation Series**

Change Endorsement

United States Fidelity and Guaranty Company  
 5801 Smith Avenue  
 Baltimore, Maryland 21209

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

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Change Number:	Change(s) Effective:	Policy Number:	Policy Expiration:
3	05/16/2002	BK01116165	05/01/2003

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**Named Insured**

VOA ASSOCIATES INCORPORATED  
 VOA & OWP&P DESIGN COLLABORATIVE FOR NORTHWESTERN  
 MEMORIAL HOSPITAL  
 224 S MICHIGAN AVE STE #1400  
 CHICAGO, IL 60604

**Your Agent**

AVA INSURANCE AGENCY  
 125 N MARTINGALE RD STE 1100  
 SCHAUMBURG, IL 60173

Agent Code: 120853

Client Number: 0001614656

**Change(s)**

\* Additional Interest: Loss Payee is Added to Premises Number 1

Form	Description
CL/BF 00 45 03 95	Change Endorsement
CL/BF 00 40 04 97	Schedule of Premises
CL/BF 10 05 09 99	Property Coverage Part Declarations
CL/BF 11 65 06 98	Loss Payable Provisions

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**Additional Premium: WAIVED**

Date Issued: 05/04/2005

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 Authorized Representative

INSURED  
 CL/BF 00 45 03 95  
 Print Date: 05/04/2005

Direct Bill Number  
 4400031464  
 Prepaid

Page 1 of 1

# The St. Paul Business Foundation

## Series



Schedule Of Premises

United States Fidelity and Guaranty Company  
5801 Smith Avenue  
Baltimore, Maryland 21209

Change(s) Effective: 05/16/2002

**Policy Number:**

BK01116165

**Reason For Issuance:**

Endorsement Number: 3

**Description of Premises:**

<b>Premises Number</b>	<b>Location/ Occupancy</b>	<b>Construction</b>
0001	224 S MICHIGAN AVE STE #1400 CHICAGO IL 60604	Fire Resistive
Customer Reference:01		
	BLDG: Primary Class: (Not Covered) Secondary Class: (Not Covered)	
	BPP: Primary Class: 871205-Architects, Engineers, and Draftsmen Secondary Class: (Not Covered)	
0002	21 DUPONT CIRCLE NW WASHINGTON DC 20045	Masonry Non-Combustible
Customer Reference:01		
	BLDG: Primary Class: (Not Covered) Secondary Class: (Not Covered)	
	BPP: Primary Class: 871205-Architects, Engineers, and Draftsmen Secondary Class: (Not Covered)	
0003	1722 HENDRICKS AVE JACKSONVILLE FL 32207	Masonry Non-Combustible
Customer Reference:01		
	BLDG: Primary Class: (Not Covered) Secondary Class: (Not Covered)	
	BPP: Primary Class: 871205-Architects, Engineers, and Draftsmen Secondary Class: (Not Covered)	
0004	801 BRICKELL AVE STE #900 MIAMI FL 33131	Fire Resistive
Customer Reference:01		
	BLDG: Primary Class: (Not Covered) Secondary Class: (Not Covered)	
	BPP: Primary Class: 871205-Architects, Engineers, and Draftsmen Secondary Class: (Not Covered)	
0005	1030 N ORANGE STE #200 ORLANDO FL 32801	Fire Resistive
Customer Reference:01		
	BLDG: Primary Class: (Not Covered) Secondary Class: (Not Covered)	
	BPP: Primary Class: 871205-Architects, Engineers, and Draftsmen Secondary Class: (Not Covered)	
0006	2200 WILSON BLVD SUITE 850 ARLINGTON VA 22201	Masonry Non-Combustible
Customer Reference:01		

# The St. Paul Business Foundation

## Series

### Schedule Of Premises

Change(s) Effective: 05/16/2002

Premises Number	Location/ Occupancy	Construction
	BLDG: Primary Class: (Not Covered) Secondary Class: (Not Covered)	
	BPP: Primary Class: 871205-Architects, Engineers, and Draftsmen Secondary Class: (Not Covered)	
0007	259 EAST ERIE STREET CHICAGO IL 60611	Frame
Customer Reference:01		
	BLDG: Primary Class: (Not Covered) Secondary Class: (Not Covered)	
	BPP: Primary Class: 871205-Architects, Engineers, and Draftsmen Secondary Class: (Not Covered)	

# The St. Paul Business Foundation Series



Property Coverage Part Declarations

United States Fidelity and Guaranty Company  
5801 Smith Avenue  
Baltimore, Maryland 21209

Change(s) Effective: 05/16/2002

**Policy Number:**

BK01116165

**Reason For Issuance:**

Endorsement Number: 3

**Limits of Insurance:**

\$ 25,000	Depositor's Forgery
\$ 200,000	Employee Dishonesty
	Name of Plans:
\$ 25,000	Fine Arts
\$ 40,000	Property Off Premises
	Money and Securities:
\$ 10,000	Inside the Premises
\$ 5,000	Outside the Premises
\$ 1,565,000	Valuable Records

**Deductible: \$500**

(The Deductible does not apply to coverage for Accounts Receivable, "Business Income," Extended Business Income, "Extra Expense," Action By Civil Authority and "Expediting Expense," Counterfeit Currency and Money Orders, and Fire Department Service Charge.)

**If Building Coverage exists, Property Value Guard Automatic Increase: 4% - IL**

**If Business Personal Property Coverage exists, Property Value Guard Automatic Increase: 3% - IL**

**Business Income and Extra Expense Covered Time Period: 12 Months**

Premises Number	Building Limit of Insurance	Building Valuation	Business Personal Property Limit of Insurance	Business Personal Property Valuation
0001	Not Covered	Not Covered	\$ 2,262,872	Repl. Cost



# The St. Paul Business Foundation Series

## Property Coverage Part Declarations

Change(s) Effective: 05/16/2002

Premises Number	Building Limit of Insurance	Building Valuation	Business Personal Property Limit of Insurance	Business Personal Property Valuation
				Accounts Receivable Limit of Insurance \$ 425,000 Debris Removal Additional Limit of Insurance \$ 15,000 Demolition Cost and Increased Cost of Construction Outdoor Trees, Shrubs, Plants and Lawns: \$ 3,000 Seasonal Automatic Increase In Business Personal Property 25% Sewer or Drain Backup \$ 25,000 Mortgagee:
0002	Not Covered	Not Covered	\$ 137,367	Repl. Cost
				Accounts Receivable Limit of Insurance \$ 35,000 Debris Removal Additional Limit of Insurance \$ 15,000 Demolition Cost and Increased Cost of Construction Outdoor Trees, Shrubs, Plants and Lawns: \$ 3,000 Seasonal Automatic Increase In Business Personal Property 25% Sewer or Drain Backup \$ 25,000 Mortgagee:
0003	Not Covered	Not Covered	\$ 51,500	Repl. Cost
				Accounts Receivable Limit of Insurance \$ 35,000 Debris Removal Additional Limit of Insurance \$ 15,000 Demolition Cost and Increased Cost of Construction Outdoor Trees, Shrubs, Plants and Lawns: \$ 3,000 Seasonal Automatic Increase In Business Personal Property 25% Sewer or Drain Backup \$ 25,000 Mortgagee:
0004	Not Covered	Not Covered	\$ 51,809	Repl. Cost

# The St. Paul Business Foundation Series



## Property Coverage Part Declarations

Change(s) Effective: 05/16/2002

Premises Number	Building Limit of Insurance	Building Valuation	Business Personal Property Limit of Insurance	Business Personal Property Valuation
	<b>Accounts Receivable Limit of Insurance</b> <b>Debris Removal Additional Limit of Insurance</b> <b>Demolition Cost and Increased Cost of Construction</b> <b>Outdoor Trees, Shrubs, Plants and Lawns:</b> <b>Seasonal Automatic Increase In Business Personal Property</b> <b>Sewer or Drain Backup</b> <b>Mortgagee:</b>			\$ 35,000 \$ 15,000  \$ 3,000  25% \$ 25,000
0005	Not Covered	Not Covered	\$ 1,068,151	Repl. Cost
	<b>Accounts Receivable Limit of Insurance</b> <b>Debris Removal Additional Limit of Insurance</b> <b>Demolition Cost and Increased Cost of Construction</b> <b>Outdoor Trees, Shrubs, Plants and Lawns:</b> <b>Seasonal Automatic Increase In Business Personal Property</b> <b>Sewer or Drain Backup</b> <b>Mortgagee:</b>			\$ 200,000 \$ 15,000  \$ 3,000  25% \$ 25,000
0006	Not Covered	Not Covered	\$ 128,750	Repl. Cost
	<b>Accounts Receivable Limit of Insurance</b> <b>Debris Removal Additional Limit of Insurance</b> <b>Demolition Cost and Increased Cost of Construction</b> <b>Outdoor Trees, Shrubs, Plants and Lawns:</b> <b>Seasonal Automatic Increase In Business Personal Property</b> <b>Sewer or Drain Backup</b> <b>Mortgagee:</b>			\$ 35,000 \$ 15,000  \$ 3,000  25% \$ 25,000
0007	Not Covered	Not Covered	\$ 5,000	Repl. Cost

# The St. Paul Business Foundation Series

## Property Coverage Part Declarations

Change(s) Effective: 05/16/2002

Premises Number	Building Limit of Insurance	Building Valuation	Business Personal Property Limit of Insurance	Business Personal Property Valuation
	Accounts Receivable Limit of Insurance			\$ 25,000
	Debris Removal Additional Limit of Insurance			\$ 15,000
	Demolition Cost and Increased Cost of Construction			
	Outdoor Trees, Shrubs, Plants and Lawns:			\$ 3,000
	Seasonal Automatic Increase In Business Personal Property			25%
	Sewer or Drain Backup			\$ 25,000
	Mortgagee:			

### Forms and Endorsements Applicable to This Coverage Part:

See attached Schedule of Forms and Endorsements CL/BF 00 35.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/16/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	CONTENTS	LASALLE NATIONAL BANK 120 S LASALLE CHICAGO, IL 60603

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.
2. The following is added to SECTION IV. B. 5. Other Insurance:  
  
For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."
3. The following is added to SECTION V. Definitions:  
  
"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

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This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	CONTRACT #001-00897482-001(CANON COLOR C OPIER)	CANON FINANCIAL SERVICES, INC. 15325 SOUTHEAST 30TH PLACE STE #100 BELLVIEW, WA 98007

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.
2. The following is added to SECTION IV. B. 5. Other Insurance:  
  
For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."
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PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	LEASE #001-07107-01 & 327929001	GE CAPITAL COLONIAL PACIFIC LEASING PO BOX 23185 PORTLAND, OR 97281-3185

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.
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PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	CONTENTS	NEWCOURT TECHNOLOGIES CORP 2ND FL PO BOX 2017 BLOOMFIELD HILL, MI 48303-2017

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
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PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	SOFTWARE	COMPAQ FINANCIAL SERVICES INSURANCE ADMINISTRATOR 420 MOUNTAIN AVE P.O. BOX 6 MURRAY HILL, NJ 07974-0006

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
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Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/16/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	LEASED COMPUTER HARDWARE/SOFTWARE LEASE #36&37 VALUE AT 75,000.00	CIT 4600 TOUCHTON RD EAST BUILDING 100, SUITE 300 JACKSONVILLE, FL 32246

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

**Loss Payable Provisions**Change(s) Effective: 05/16/2002

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

**Schedule****Premises****Number****Description of Property****Loss Payee (Name and Address)**

0001

HARDWARE LEASE 9010004763000 VALUE \$50,000 LOCATED 85% IN CHICAGO 15% IN ORLANDO.  
SOFTWARE LEASE 9010004764000 VALUE AT \$25,000 LOCATED 70% CHICAGO 30% WASHINGTON DC.

CIT TECHNOLOGY FINANCING SERVICES, INC.  
PO BOX 3547  
BELLEVUE, WA 98009

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/16/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

#### Premises

Number	Description of Property
0002	SOFTWARE

#### Loss Payee (Name and Address)

COMPAQ FINANCIAL SERVICES  
INSURANCE ADMINISTRATOR  
420 MOUNTAIN AVENUE  
P.O. BOX 6  
MURRAY HILL, NJ 07974-0006

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.
2. The following is added to SECTION IV. B. 5. Other Insurance:  
  
For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."
3. The following is added to SECTION V. Definitions:  
  
"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

**Loss Payable Provisions**Change(s) Effective: 05/16/2002

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**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

**Schedule**

<b>Premises Number</b>	<b>Description of Property</b>	<b>Loss Payee (Name and Address)</b>
0002	LEASED COMPUTER HARDWARE/SOFTWARE LEASE #36&37 VALUE AT 75,000.00	CIT 4600 TOUCHTON RD EAST BLDG 100, SUITE 300 JACKSONVILLE, FL 32246

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/16/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0005	SOFTWARE	COMPAQ FINANCIAL SERVICES INSURANCE ADMINISTRATOR 420 MOUNTAIN AVENUE P.O. BOX 6 MURRAY HILL, NJ 07974-0006

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- Adjust losses with you; and
- Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/16/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0005	LEASED COMPUTER HARDWARE/SOFTWARE LEASE #36&37 VALUE AT 75,000.00	CIT 4600 TOUCHTON RD EAST BLDG 100, SUITE 300 JACKSONVILLE, FL 32246

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- Adjust losses with you; and
- Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 05/16/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0007	LEASED COMPUTER EQUIPMENT	ARLINGTON CAPITAL BOX 7023 305 W BEAVER SUITE 400 TROY, MI 48007-7023

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

# The St. Paul Business Foundation Series



Change Endorsement

United States Fidelity and Guaranty Company  
5801 Smith Avenue  
Baltimore, Maryland 21209

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Change Number:	Change(s) Effective:	Policy Number:	Policy Expiration:
4	07/30/2002	BK01116165	05/01/2003

## Named Insured

VOA ASSOCIATES INCORPORATED  
VOA & OWP&P DESIGN COLLABORATIVE FOR NORTHWESTERN  
MEMORIAL HOSPITAL  
224 S MICHIGAN AVE STE #1400  
CHICAGO, IL 60604

## Your Agent

AVA INSURANCE AGENCY  
125 N MARTINGALE RD STE 1100  
SCHAUMBURG, IL 60173

Agent Code: 120853

Client Number: 0001614656

## Change(s)

\* Additional Interest: Loss Payee for Premises Number 1 is Amended to read:  
CIT

4600 TOUCHTON RD EAST  
BUILDING 100, SUITE 300  
JACKSONVILLE, FL 32246

\* Additional Interest: Loss Payee for Premises Number 1 is Amended to read:  
CIT TECHNOLOGY FINANCINGSERVICES, INC.

PO BOX 3547  
BELLEVUE, WA 98009

Form	Description
CL/BF 00 45 03 95	Change Endorsement
CL/BF 11 65 06 98	Loss Payable Provisions

**Additional Premium: WAIVED**

Date Issued: 05/04/2005

\_\_\_\_\_  
Authorized Representative

INSURED  
CL/BF 00 45 03 95  
Print Date: 05/04/2005

Direct Bill Number  
4400031464  
Prepaid

Page 1 of 1



Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 07/30/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	CONTENTS	LASALLE NATIONAL BANK 120 S LASALLE CHICAGO, IL 60603

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- Adjust losses with you; and
- Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 07/30/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	CONTRACT #001-00897482-001(CANON COLOR C OPIER)	CANON FINANCIAL SERVICES,INC. 15325 SOUTHEAST 30TH PLACE STE #100 BELLVIEW, WA 98007

1. The following is added to SECTION IV. A. 5. Loss Payment:  
  
Loss Payable.  
  
For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:
  - a. Adjust losses with you; and
  - b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.
2. The following is added to SECTION IV. B. 5. Other Insurance:  
  
For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."
3. The following is added to SECTION V. Definitions:  
  
"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 07/30/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	LEASE #001-07107-01 & 327929001	GE CAPITAL COLONIAL PACIFIC LEASING PO BOX 23185 PORTLAND, OR 97281-3185

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 07/30/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises		
Number	Description of Property	Loss Payee (Name and Address)
0001	CONTENTS	NEWCOURT TECHNOLOGIES CORP 2ND FL PO BOX 2017 BLOOMFIELD HILL, MI 48303-2017

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.

Policy Number: BK01116165

## Loss Payable Provisions

Change(s) Effective: 07/30/2002

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### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

PROPERTY COVERAGE PART.

### Schedule

Premises Number	Description of Property	Loss Payee (Name and Address)
0001	SOFTWARE	COMPAQ FINANCIAL SERVICES INSURANCE ADMINISTRATOR 420 MOUNTAIN AVE P.O. BOX 6 MURRAY HILL, NJ 07974-0006

1. The following is added to SECTION IV. A. 5. Loss Payment:

Loss Payable.

For Covered Property in which both you and a Loss Payee shown in the Schedule have an insurable interest, we will:

- a. Adjust losses with you; and
- b. Pay any claim for loss jointly to you and the Loss Payee, as interests may appear.

2. The following is added to SECTION IV. B. 5. Other Insurance:

For Covered Property that is the subject of a contract of sale, the word "you" includes the "Loss Payee."

3. The following is added to SECTION V. Definitions:

"Loss Payee" includes a person or organization you have entered a contract with for the sale of Covered Property.